FEC FORM 1

STATEMENT OF **ORGANIZATION**

DM 1:51

	•	ZOIL III PH 1. 3
NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) ever the lines.	12FE4M5 EC MAIL CENTER
We the PAG	· <u> </u>	
ADDRESS (number and street)	12,700 Wood lands Vill	age Bilivid
(Check if address is changed)	Suite 300-240	
o onango,	Filagisitiafifi	A.Z. 8.6.0.0.11-1
COMMITTEE'S E-MAIL ADDRE	SSS .	
(Check if address is changed)	Optional Second E-Mail Address	· · · · · · · · · · · · · · · · · · ·
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL) Wetheraciocom	
2. DATE 66 3	0 2014	
3. FEC IDENTIFICATION N	UMBER ▶ C 00564989	
4. IS THIS STATEMENT	NEW (N) OR X AMENDED (A)	
I certify that I have examined t	his Statement and to the best of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Treasure	Kevin Ordean	
Signature of Treasurer		Date 06'30'2014.
NOTE: Submission of false, error	neous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530	

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FEC Form 1 (Re	evised 02/200)9
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TYP	E OF C	OMMITTEE .		
Car	ndidate	Committee:		
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)		
(b)	b) . This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	ne of didate			
	didate y Affiliatio	Office State Senate President District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	ne of didate			
Par	rty Com	nmittee:		
(d)		(National, State (Democratic, This committee is a committee of the committ		
Pol	itical A	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:		
	C,	Corporation Corporation w/o Capital Stock Labor Organization		
		Membership Organization Trade Association Cooperative		
	•	[:-:] [:] In addition, this committee is a Lobbyist/Registrant PAC.		
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)		
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
		raising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.		
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number C		
	2.	FEC ID number C		
	3 .			
	J.	**************************************		
	4.	FEC ID number C		

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Write or Type Committee Nam	ne				
We the	PAC				
6. Name of Any Connected	Organization, Affiliat	ed Committee, Joi	nt Fundraising Re	presentative, or Leader	ship PAC Sponsor
Mana		11111	1 1 1 1 1 1		
Manailli	<u> </u>	<u> </u>	<u> </u>		
				<u> </u>	
Mailing Address					
	· 			بنا ليا	لبريا-لب
		CITY		STATE	ZIP CODE
Relationship:	ted Organization	filiated Committee	Joint Fundraisi	ng Representative 🖫 liL	eadership PAC Sponsor
(A)	<u> </u>		3-1		
7. Custodian of Records: id books and records.	lentify by name, addres			ition of the person in p	ossession of committee
Full Name Lau				7 Pl	
Mailing Address	^			lagier Blivi	<u> </u>
	\sim	300-241	0	1	
	tlagsti	att		HZ 86	0011-
Title or Position		CITY		STATE	ZIP CODE
Treasure	<u> </u>	لبيب	Telephone n	umber 928 - 1	600-106541
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).					
Full Name Key	in Davi	s. Order	<u> </u>		
Mailing Address	12-700 W	00/2/10-10	25 Null	age Blv	<u>d</u>
	Sulte	300-24	0		
•	Flagst	afff i		LAIZI 1869 STATE	0,0,1,
Title or Position	_			_	
linia a surrell	<u> </u>	للللل	Telephone n	umber [128] - [600-0654

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FEC Form 1 (Revise	ed 02/2009)			Page 4
Full Name of Designated Agent	NIDOWN JOHNES	400419		
Mailing Address	27,00 Woodl	HAIDS VILLI	age is	alvid
	Suite 300-	240		<u> </u>
	Flagstaff.		STATE	ZIP CODE
Title or Position Dessignate	J. Agent	Telephone nur	mber <u> 9,2</u>	81-12,251-[7,36.4]
Banks or Other Depositor safety deposit boxes or mai Name of Bank, Depository,		tories in which the commit	tee deposits fu	nds, holds accounts, rents
Cha	Seimm	<u></u>	<u></u>	
Mailing Address	11484 S MIL	tan Rd		
		<u> </u>		
	Flagsitafif		AZ	669911-1111
	CITY		STATE	ZIP CODE
Name of Bank, Depository,	etc.			
Acu	Zana State	Graduti Vin	ıpın .	<u> </u>
Mailing Address	1321 N Beav	en Still		

Flagstaff

CITY

860011-

ZIP CODE

12

STATE

A CONTRACTOR OF THE PARTY OF TH

WE THE PAC (928) 600-0654 THE UPS STORE #0990 STE 300 2700 WOODLANDS VILLAGE BLVD FLAGSTAFF AZ 85001

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SHIP FEDERAL ELECTION COMMISSION TO: 999 E ST NW

WASHINGTON DC 20463-0001



MD 201 9-83



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2. ON REVIEST regarding UPS Yerms, and online of Braitation of Batility Where allowed by lane, upones. If experied from the US, subpoer carefine that the commoditie, technology or activary as. Otherston contrary to lave in published.

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** UP5 Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify): **PREPARER** (8/2013)